				Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR				7217/71715				
CLAIMS AS FILED - PART I (Column 1) (Column 2)			SMAL TYPE	SMALL ENTITY OTHER THAN- TYPE OR SMALL ENTITY				
TOTAL CLAIMS	6		RAT	E FEE]	RATE	FEE	
FOR	NUMBERFILED	NUMBER EXTRA	BASIC	FEE 385.00	OR	Basic FEE	770.00	
TOTAL CHARGEABLE CLAIMS	∫ minus 20=	. 0	XS 9).	OR	X\$18=		
INDEPENDENT CLAIMS	J minus 3 = 0		X43	is.	OR	X86=		
MULTIPLE DEPENDENT CLAIM P	T CLAIM PRESENT		+14	3.	OR	+290=		
* If the difference in column 1 is less than zero, enter *0" in column 2			TOTA	AL	ОЯ	TOTAL	720	
CLAIMS AS AMENDED - PART II				OTHER THAN				
(Column 1)	(Cotur	SMA	LL ENTITY	OR 1	SMALL			
Total • O Independent • O	NUM PREVIO PAID	BER PRESENT DUSLY EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total • O	Minus -	10 -	XS 8	=	OR	X\$18=		
Independent - 2	Minus •••	3- · /	X43		ОЯ	X86=		
PINST PRESENTATION OF ME	DETIFIE DEPENDENT	/	+145	i.e.	OR	+290=		
			ADDIT.	TAL	OR	TOTAL ACOIT, FEE	•	
(Column 1)	(Colur					•		
CLAIMS REMADEING AFTER AMENDMENT	HIGH NUM PREVIC PAID	BER PRESENT BUSLY EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total • Condependent • 3	Minus &	20 -	X\$ 9	-	OR	X\$18=		
FIRST PRESENTATION OF MI	Minus see	2 · /	X43	•	OR	X86=		
·	DETIFICA DEFENDENT		+145	•	OR	+290-		
	· ·		ADDIT I	YAL TEE	OR	ADDIT, FEE		
//9/06 (Cotumn 1) (Cotumn 2) (Cotumn 3)								
CLAIMS REMAINING AFTER AMENDMENT	PIGR NUM PREVX PAID	BER PRESENT DUSLY EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
Total • 6	Minus - 2	0 -	X\$ 9	8	OR	X\$18=		
Total • 6 Independent • 7	Minus ee /	7	X43	•	OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			+145		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."				м —	OR	TOTAL		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT, FEE ADDIT, FEE ADDIT, FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.								
FORM 9TO-479 (Rev. 1000) Peters and Trademan Office, U.S. DEPARTMENT OF COMMERCE								

Peters and Toxismush Office, U.S. DEPARTMENT OF CONMERCE